




# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2008 8:00 am**  
**Secretary of State**

04-14-2008 90037 006 \*\*\*\*70.00

<b>DOCUMENT # N18044</b> 1. Entity Name <b>RYDER CUP VILLAS CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>300 AVE OF CHAMPIONS PALM BEACH GARDENS, FL 33418</b>			Mailing Address <b>300 AVE OF CHAMPIONS PALM BEACH GARDENS, FL 33418</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.  City & State  Zip      Country		3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip      Country			
4. FEI Number <b>59-2833790</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				04032008    Chg-NP    CR2E037 (12/06)	
6. Name and Address of Current Registered Agent  <b>QUEEN, SUSAN M. 300 AVE OF THE CHAMPIONS PLM BCH GARDENS, FL 33418</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>300 Avenue of the Champions</b> <b>Suite 120</b> City <b>FL</b> Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
Make check payable to <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP POULOS, JON 204 RYDER CUP CIR SOUTH PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>300 Avenue of the Champions #120</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PURDY, CAROLYN 606 RYDER CUP CIRCLE PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>300 Avenue of the Champions #120</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMM, CATHY 602 RYDER CUP CIR PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>300 Avenue of the Champions #120</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PUDER, RICHARD 703 RYDER CUP CIRCLE PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>300 Avenue of the Champions #120</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ISSACS, JIM 203 RYDER CUP CIR PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>300 Avenue of the Champions #120</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CALLANAN, BILL 605 RYDER CUP CIR SOUTH PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>300 Avenue of the Champions #120</b>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> 			Date <b>4/10/08 (561) 346-7339</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		

ATTACHMENT 40067421

**Additions to Document #N18044**  
**Ryder Cup Villas Condominium Association, Inc.**

ADD: Director  
Dave Fleischer  
300 Avenue of the Champions, #120  
Palm Beach Gardens, FL 33418

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